/	OITE E								
/	FEE FRANSMITTAL FRANSMITTAL FRANSMITTAL FRANSMITTAL Applicant claims small entity status. See 37 CFR 1.27		Complete if Known						
			Application Number	10/055,474					
			Filing Date	1/23/02					
			First Named Inventor	James L. Tracy					
١			Examiner Name	Jeffrey J. Piziali					
			Group Art Unit	2673					
ı	TOTAL AMOUNT OF PAYMENT	(\$) 1770.00	Attorney Docket No.	CM02045K					

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)						
Check Credit card Money Order Other None		OITIONAI	L FEES					
X Deposit Account:		0		nall tity				
Deposit Account Number 502117	Fee	Fee	Fee	Fee				
Deposit Account Name Motorola, Inc.	Code	(\$)	Code	(\$)		Fee Description		
	1051		2051		Curaba			
The Director is authorized to: (check all that apply)  X Charge fee(s) indicated below X Credit any overpayments		130 50	2051 2052	65 25		arge – late filing fee or oath arge – late Provisional filing		
X Charge fee(s) indicated below X Credit any overpayments	1052 1053	130	1053	130		nglish specification		
Charge any additional fee(s) during the pendency of this application, except					Cor file	an a request for ex parts		
issue fee		2520	1812	2520		ng a request for ex parte		
						mination		
Charge fees(s) indicated below, except for the filing fee to the	1804	920°	1804	920*		ting publication of SIR prior to		
above-identified deposit account.	1805	1840*	1805	1840°		sting publication of SIR after		
					-	ner action		
FEE CALCULATION	1251	110	2251	55	Extens	ion for reply within first month		
	1252	430	2252	210	Extensi	on for reply within second month		
	1253	980	2253	475	Extensi	on for reply within third month 980		
1. BASIC FILING FEE	1254	1530	2254	740	Extensi	on for reply within fourth month		
	1255	2010	2255	1005		ion for reply within fifth month		
- Large Entity Small Entity	1401	330	2401	165		of Appeal		
Fee Fee Fee Code (\$) Code (\$) Fee Paid	1402 1403	330 290	2402 2403	165 145		a brief in support of an appeal st for oral hearing		
5555 (b) 5555 (a)						n to institute a public use		
	1451	1510	1451	1510	procee	eding n to revive – unavoidable		
1001 790 2001 385 Utility filing fee 1002 340 2002 170 Design filing fee	1452 1453	110 1330	2452 2453	55 665		n to revive – unavoidable		
1002 340 2002 170 Design lilling fee	1501	1330	2501	665		ssue fee (or reissue)		
1004 780 2004 385 Reissue filing fee	1502	480	2502	240		issue fee		
1005 160 2005 80 Provisional filing fee	1503	640	2503	320	_	ssue fee		
,	1460	130	1460	130		ns to the Commissioner		
SUBTOTAL (1) (\$)	1807	50	1807	50		ssing fee under 37 CFR 1.17(q)		
2. EXTRA CLAIM FEES	1806	180	1806	180		ssion of IDS		
Previously Extra Fee from	8021	40	8021	40		ding each patent assignment		
Paid** Claims below Fee Paid  Total Claims - 20 = X 18 =	1809	770	2809	385		perty (times number of properties) a submission after final		
Independent Claims - 3 = X 88 =					_	on (37 CFR § 1.129(a))		
	1810	770	2810	385	For ea	ch additional invention to be		
Multiple Dependent 290 =					examir	ned (37 CFR § 1.129(b))		
Large Entity Small Entity	1801	790	2801	385		st for Continued Examination 790		
Fee Fee Fee Fee Code (\$) Code (\$) Fee Description	1802	900	1802	900	(RC Reque	est for expedited examination		
1202 18 2202 9 Claims in excess of 20	1					a design application		
1201 84 2201 42 Independent claims in excess of 3	Other fee	(specify)				<del></del>		
1203 280 2203 140 Multiple dependent claim, if not paid 1204 84 2204 42 *Reissue independent claims over original patent	<u> </u>		_					
1204 04 2204 42 Hoosac Independent of all the patient								
1205 18 2205 9 *Reissue claims in excess of 20 and over original								
patent	ļ							
SUBTOTAL (2) (\$)	* Reduced by Basic Filing Fee Paid							
**or number previously paid, if greater, For Reissues, see above.								
SUBMITTED BY						Complete (if applicable)		
Name (Print/Type) Scott M. Garrett	Registra	ation No.	39,9	88		Telephone Attorney		
Signature Sam Par					Date	10/19/04		